ADVISORY COMMITTEE ON IMMUNIZATION PRACTICES

VACCINES FOR CHILDREN PROGRAM

VACCINE TO PREVENT HUMAN PAPILLOMAVIRUS (HPV) INFECTION

The purpose of this resolution is to add quadrivalent HPV Vaccine to the Vaccine for Children Program.

Eligible groups

Females 9 through 18 years of age.

Recommended schedule for quadrivalent HPV vaccine

A 3-dose series for the quadrivalent HPV vaccine is recommended for females at age 11 to 12 years old with the following schedule:

1st dose: at elected date

2nd dose: 2months after the first dose 3rd dose: 6 months after the first dose

Minimum age and intervals for quadrivalent HPV vaccine

Minimum Age Dose 1 to 2 Dose 2 to 3 9 years old 4 weeks 12 weeks

Catch-up vaccination

Vaccination is recommended for females 13 through 18 years of age who have not been previously vaccinated or who have not completed the full series.

Other vaccination

Eligible females as young as 9 years of age can be vaccinated.

Interrupted vaccine schedules

If the quadrivalent HPV vaccine schedule is interrupted, the vaccine series does not need to be restarted. If the series is interrupted after the first dose, the second dose should be given as soon as possible, and the second and third doses should be separated by an interval of at least 12 weeks. If only the third dose is delayed, it should be administered as soon as possible.

Recommended dosage

Refer to product package inserts.

Special situations

Immunocompromised persons

Because quadrivalent HPV vaccine is a subunit vaccine, it can be administered to persons who are immunosuppressed as a result of disease or medications; however, the immune response to the vaccine might be less than that in persons who are immunocompetent.

Vaccination during pregnancy

Quadrivalent HPV vaccine is not recommended for use in pregnancy. The vaccine has not been causally associated with adverse outcomes of pregnancy or adverse events to the developing fetus. However, data on vaccination in pregnancy are limited. Until further information is available, initiation of the vaccine series should be delayed until after completion of the pregnancy. If a woman is found to be pregnant after initiating the vaccination series, completion of the 3-dose regimen should be delayed until after completion of the pregnancy. If a vaccine dose has been administered during pregnancy, there is no indication for any intervention. A vaccine in pregnancy registry has been established; patients and health-care providers are encouraged to report any exposure to quadrivalent HPV vaccine during pregnancy by calling (800) 986-8999.

Lactating women

Lactating Women can receive HPV vaccine.

Precautions and contraindications

Acute illnesses

Quadrivalent HPV vaccine can be administered to persons with minor acute illnesses (e.g., diarrhea or mild upper respiratory track infections, with or without fever). Vaccination of persons with moderate or severe acute illnesses should be deferred until after the illness improves.

Immediate hypersensitivity or allergy to vaccine components

Quadrivalent HPV vaccine is contraindicated for persons with a history of immedicate hypersensitivity to yeast or to any vaccine component. Despite a theoretic risk for allergic reaction to vaccination in persons with allergy to *Saccharomyces cerevisiae* (baker's yeast), no adverse reactions have been documented after vaccination of persons with a history of yeast allergy.

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